2012101 Form Department of the Treasury Internal Revenue Service

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

2011 Open to Public

		The organization may have to use a copy of this feetant to satisfy state to		1101110	Estatus pecuon			
<u>A</u> _	For the 2011 of	calendar year, or tax year beginning $07/01/11$ , and ending $06/30/12$	<u></u> _					
В	Check if applicable	C Name of organization	D	Employ	er identification number			
	Address change	Millwrights Local Union No. 1121	1					
一	•	Doing Business As		04-	2315531			
	Name change	Number and street (or P O box if mail is not delivered to street address)	oom/suite E		one number			
	Initial return	90 Braintree St		617	-254-1655			
	Terminated	City or town, state or country, and ZIP + 4		017	-234-1033			
一	A	l		_	227 525			
	Amended return	Allston MA 02134  F Name and address of principal officer	G	Gross rece	ipts\$ 337,535			
	Application pending		H(a) Is this a group	group return for affiliates? Yes X No				
		James Donovan						
		57 Highland St	H(b) Are all affiliat					
		Walpole MA 02081	if "No," a	ttach a list	(see instructions)			
1	Tax-exempt status	501(c)(3) <b>X</b> 501(c) ( <b>5</b> ) <b>◄</b> (insert no ) 4947(a)(1) or 527						
<u>J</u>	Website.	N/A	H(c) Group exemp	otion numb	er 🕨			
	Form of organization	Corporation Trust Association X Other ► Labor Union L Year	of formation	ļ	M State of legal domicile MA			
_ <u>P</u>	Part I Si	ummary						
	1 Briefly de	escribe the organization's mission or most significant activities						
ą,	To	organize workers, to secure improved wages, hours, wo	rking con	ditio	ns			
au c	and	other economic advantages for its members through or	ganizatio	n,				
Ĕ		otiation, and collective bargaining.		•				
Governance		his box ▶ if the organization discontinued its operations or disposed of more than 25%	of its net asset	e				
Ğ		of voting members of the governing body (Part VI, line 1a)	Or its het asset	3	10			
රේ ග		of independent voting members of the governing body (Part VI, line 1b)		4	0			
© 2017, Activities	5 Total			<del> </del>	<del></del>			
≂	5 Total nui	mber of individuals employed in calendar year 2011 (Part V, line 2a)		5	12			
ලා ₹		mber of volunteers (estimate if necessary)		6	0			
,	l .	related business revenue from Part VIII, column (C), line 12		7a	0			
<u>';</u>	b Net unre	elated business taxable income from Form 990-T, line 34		7b	0			
] ]	0.0	there and exacts (Book) (III Lee 41)	Prior Year	459	Current Year			
e e	1	itions and grants (Part VIII, line 1h)			80,686			
SCANNED (	i	n service revenue (Part VIII, line 2g)	292,		229,754			
Z é	1	ent income (Part VIII, column (A), lines 3, 4, and 7d)		277	306			
Z-	1	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		743	25,760			
<u>ئ</u> ۔	12 Total rev	venue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	385		336,506			
$\tilde{\omega}$	13 Grants a	and similar amounts paid (Part IX, column (A), lines 1–3)		0	33,438			
	14 Benefits	paid to or for members (Part IX, column (A), line 4)		0	18,300			
S	15 Salaries	, other compensation, employee benefits (Part IX, column (A), lines 5–10)	119	, 825	114,113			
Expenses	16a Professi	onal fundraising fees (Part IX, column (A), line 11e)	0					
ğ	b Total fun	ndraising expenses (Part IX, column (D), line 25) ▶ 0			Same of the same of the same			
Ü		cpenses (Part IX, column (A), lines 11a-11d, 11f-24e)	195	, 358	190,593			
	18 Total exp	penses Add lines 13–17 (must equal Part IX, column (A), IDES EIVED	315	183	356,444			
	1 19 Revenue	e less expenses Subtract line 18 from line 12	70	265	-19,938			
Net Assets or	3	IOI B	leginning of Currer		End of Year			
Sets	20 Total as:	sets (Part X, line 16)	299	,591	<u>278,804</u>			
Š.	21 Total liat	bilities (Part X, line 26)	23	393	22,544			
2	22 Net asse	ets or fund balances Subtract line 21 from line 20	276	198	256,260			
		ignature Block						
	Inder penalties of	perjury, I declare that I have examined this return, including accompanying schedules and statements	s. and to the best	of my kn	owledge and belief, it is			
	•	complete Declaration of preparer (other than officer) is based on all information of which preparer has	· ·	•				
_		( a) a il con d		9~	17-12			
Sig	an   7 (	Signature of officer		Date				
He	- 1	Darrin Daniels Financial Tecretor	_					
110		Type or contrage and title	/					
_	Pont/Tvr	pe preparer's name Preparer's signature of the state of t	₩ Date	l os a st	ıf PTIN			
Pai	i.d	Provide I / / for	7	Check	□"			
	narer Italia	nce R. Mooney	08/30/1					
	Firms na	· · · · · · · · · · · · · · · · · · ·	Firm	's EIN	22-2310351			
US	e Only	247 New Jersey Ave.						
_	Firm's ac		Pho	ne no	609-407-0056			
		iss this return with the preparer shown above? (see instructions)			X Yes No			
FOI		eduction Act Notice, see the separate instructions.			990 (2011)			
UAA	•				17 4			

orm 990 (2011) M	<u> </u>		315531	Page 2
		ervice Accomplishments	4 111	
	eck if Schedule O conta e the organization's mission	ains a response to any question in this Par	Ţ III	
To organ:	ize workers, t	o secure improved wages, hantages for its members th		ions
		ctive bargaining.		
Did the organiz		ant program services during the year which were not	listed on the	Yes X No
	ribe these new services on So zation cease conducting, or r	chedule O nake significant changes in how it conducts, any pro	gram	v 👽 N.
If "Yes," descr	nbe these changes on Sched			Yes X No
expenses Sec	ction 501(c)(3) and 501(c)(4)	e accomplishments for each of its three largest progi- organizations and section 4947(a)(1) trusts are requi- kpenses, and revenue, if any, for each program servi-	red to report the amount of	
4a (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4b (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c (Code	) (Expenses \$	including grants of \$	) (Revenue \$	
·	,,,,		,,	·
4d Other program (Expenses \$	n services (Describe in Sche		Revenue \$	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		<u> </u>
2	is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	ļ	ŀ	
	candidates for public office? If "Yes," complete Schedule C, Part I	3	X	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		İ	
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	)		
	"Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-	1	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	_7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part		1	
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	ł	- 1	
	complete Schedule D, Part IV	9	-+	<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			**
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable		- 1	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		., l	
	complete Schedule D, Part VI	11a	X	
b	<b>9</b>			v
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	أيما		x
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	<del></del> +	
ď		اسما	ļ	x
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	
e		11e	^	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	ľ	X
420	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
124	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a	ļ	X
h	Schedule D, Parts XI, XII, and XIII  Was the assentation included in consolidated undependent audited financial statements for the tax year? If "Yes " and if	120		
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b		174		
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	170		
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			- <del></del> -
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	.	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		x
20a	·	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
_				

Form 990 (2011) Millwrights Local Union No. 1121 04-2315531
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 19 if "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
!4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34	X	<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			·
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	L

DAA

Form **990** (2011)

Pa	art V Statements Regarding Other IRS Filings and Tax Compliance	<del></del>	<u>.</u>	
	Check if Schedule O contains a response to any question in this Part V			
4-			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1a 0  1b 0			
b		-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4-		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c		-
	Statements, filed for the calendar year ending with or within the year covered by this return  2a 12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		x	ĺ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		Ħ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
þ	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<del> </del> -
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
b	organization solicit any contributions that were not tax deductible?  If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		X
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	100		$\vdash$
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e_		ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			1
9	Sponsoring organizations maintaining donor advised funds.	8		┢
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		┢┈
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	}		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders	_		
þ	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them )	_		1
12a		12a		ļ
b 12	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 504(a)/30 gualified pages 54 houst increase is a constant.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	42		├
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.	13a		<del> </del>
b	Enter the amount of reserves the organization is required to maintain by the states in which			
~	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	$\dashv$		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	··········	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

	are
17	List the states with which a copy of this Form 990 is required to be filed ▶ None
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)
	available for public inspection. Indicate how you made these available. Check all that apply
	Own website Another's website X Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy,
	and financial statements qualified to the multiplication of the formation of the formation of the financial statements are also become a financial statements.

and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization > Management 90 Braintree St.

Allston

MA 02134

617-254-1655

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per week (describe	bo	k, unle	heck ss pe	ition more rson i	than o s both r/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)Matthew Bernazza	ni	-							<del></del>	<del></del>
Trustee	1.00	X						671	o	0
(2) Andrew J. Conrad								· <del></del>		
Trustee	1.00	x						604	o	0
(3) David Goodine		П								<del></del>
Trustee	1.00	X						470	0	0
(4) John J. Farren,	Sr.									
Treasurer	1.00			X				2,721	0	0
(5) James J. Donovan										
President	1.00			X				1,946	0	0
(6) Joseph J. Keaney										
Recording Secretary	1.00			X				1,309	0	0
(7) James P. Dalton								-		
Financial Secretary	1.00	<u>L</u> _		X	<u> </u>			1,309	0	0
(8) Paul D. Costa										
Vice President	1.00	<u> </u>		X			`	806	0	0
(9) Stanley Swenson			Ì							
Conductor	1.00			X				604	0	0
(10) Michael P. Camus										
Warden	1.00			X		<u> </u>		537	0	0
(11)										
(12)				-	-					
(13)			-		-					
(14)		╁			-	<del>  -</del>				<del></del>

	990 (2011) Millwrigh rt VII Section A. Officers												P <u>age</u>	
<u>F a</u> i	(A) Name and title	nd title Average hours per week (describe			Pos check ess pe	ition more rson i	than o	ne an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	Estii amo ot compe	(F) Estimated amount of other compensation from the		
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organ and r	itne ization elated zations		
15)	<del></del>													
16)														
17)	<del></del>										<u>.                                      </u>			
18)														
19)			ļ <u></u>											
20)				ļ <u>.</u>										
21)											<del></del>			
22)												-		
23)						ļ								
24)														
25)														
	Sub-total  Total from continuation she	ets to Part VII,	Sect	ion /	`	•		<b>&gt;</b>	7,216					
d	Total (add lines 1b and 1c)	<del></del>						<b>•</b>	7,216					
2	Total number of individuals (in reportable compensation from				hose	list	ed al	oove	e) who received more than \$	6100,000 in				
3	Did the organization list any fo								yee, or highest compensate	ed		Yes	3 N	
4	employee on line 1a? If "Yes," For any individual listed on line organization and related organ	e 1a, is the sum	of re	porta	ble d	comp	ens	atior			3			
5	individual  Did any person listed on line 1	a receive or acc	rue c	omp	ensa	ation	from	any	vunrelated organization or i		4		3	
Sec	for services rendered to the or tion B. Independent Contract		es,	com	olete	Scr	eaui	e J t	or such person		5		3	
1	Complete this table for your five compensation from the organic	ve highest comp	ensa ompe	ted ii	ndep	end or th	ent c e ca	ontra lend	ar year ending with or within	n the organization's tax year				
	Name and	(A) I business address							Descrip	(B) tion of services		(C) Compen:	sation	
		····							<del></del>					
								-				<del>.</del>		
								-						
	· · · · · · · · · · · · · · · · · · ·							-	<del>-</del>	<u> </u>				
2	Total number of independent	contractors (===1:	ıdı	. ht	Dot !				no listed shares who	·				
4	Total number of independent	of compensation							e iisteu above) wno	0				

Par		Statement of Reve				0. 1121	04-2315531		Page 9
	·					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns	1a						
S a	b	Membership dues	1b		80,686				
A, A	C	Fundraising events	1c						
E G	ď	Related organizations	1d						
ξE	е	Government grants (contributions)	1e						
e ti	f	All other contributions, gifts, grants,							
듗		and similar amounts not included above	1f						
gg	_	Noncash contributions included in lines 1a-	1f \$						
Program Service Revenue Contributions, Gifts, Grants	<u>h</u>	Total. Add lines 1a-1f			<b>•</b>	80,686		<del></del>	
ě	20	Manhau Bassa			Busn. Code	202 107			202 107
Š	2a b	Member Dues			<del>                                     </del>	202,187			202,187
8	C	Work Assessment Dues Refunds			<del>                                     </del>	27,673 -106			27,673 -106
Ē	d	Dues Kermids				-100			-106
Ε	_				<del>                                     </del>				<del> </del>
gg	f	All other program service rever	nue		<del>                                     </del>				<del>- </del>
윤		Total. Add lines 2a–2f	100		<b>—</b>	229,754			
$\neg$		Investment income (including of	dividend	s. interes			· · · · · · · · · · · · · · · · · · ·		
		and other similar amounts)			▶	306			306
1	4	Income from investment of tax	-exempt	bond pr	oceeds ►				
İ	5	Royalties		·	▶ [				
		(ı) Real		(II) F	ersonal				, i
	6a	Gross rents							
	b	Less rental exps							
	C	Rental inc or (loss)							
		Net rental income or (loss)			<b>•</b>				
	1 a	Gross amount from sales of assets (i) Securities		(11)	Other				
		other than inventory							
	b	Less cost or other							
		basis & sales exps							
		Gain or (loss)							
.		Net gain or (loss)	. г		<b>&gt;</b>				
9	ва	Gross income from fundraising ever	nts						
Ve		(not including \$							
8		of contributions reported on line 1c) See Part IV, line 18							
Other Revenue	h	Less: direct expenses	a b						
٥		Net income or (loss) from fund	~ _	avente		1			İ
		Gross income from gaming activities		- VCING					
		See Part IV, line 19	a						
	b	Less direct expenses	ь						
		Net income or (loss) from gam	ing activ	/ities	<b>•</b>	1	ĺ		1
		Gross sales of inventory, less	Ĭ	<del></del>				······································	
		returns and allowances	a		1,443				
	b	Less. cost of goods sold	b		1,029				
L		Net income or (loss) from sale:	s of inve	entory	<b></b>	414			414
		Miscellaneous Revenue			Busn. Code				
	11a	Reimbursements				15,888	15,888		
	b	Rental Income				6,000	6,000		
	С	Other Income				3,458	3,458		
		All other revenue			L				
		Total. Add lines 11a-11d			▶ _	25,346			1
	12	Total revenue. See instruction	าร		<u> </u>	336,506	25,346		0 230,474

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

requ	red to complete columns (B), (C), and (D)  Check if Schedule O contains a response	to any guestion in this Dod IV	<u> </u>	·	
-		(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
1	Grants and other assistance to governments and	<del></del>	expenses	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21	4,500			
2	Grants and other assistance to individuals in				
_	the U S See Part IV, line 22	28,938			
3	Grants and other assistance to governments,				
•	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members	18,300			
5	Compensation of current officers, directors,		<u> </u>		
	trustees, and key employees	7,218			
6	Compensation not included above, to disqualified	7.25			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				}
7	Other salaries and wages	56,484	····		
8	Pension plan accruals and contributions (include			<del> </del>	
	section 401(k) and 403(b) employer contributions)	22,150			
9	Other employee benefits	24,348			<u> </u>
10	Payroll taxes	3,913			
11	Fees for services (non-employees)		<del>1'- 5</del>		
а	Management				
b	Legal	2,820	· · · · · · · · · · · · · · · · · · ·		
С	Accounting	11,541			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	7,352			
12	Advertising and promotion				
13	Office expenses	26,234			
14	Information technology	2,380			
15	Royalties				
16	Occupancy	16,930			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,197			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,613			
23	Insurance	1,828			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
a	Per Capital Tax	106,167			
b	Christmas Party	10,228			
C	Misc	661			
d	Flowers	558			
е		84			
25		356,444	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   following SOP 98-2 (ASC 958-720)				
DAA				<u> </u>	Form 990 (2011)

P	art X	` Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			254,389	1	235,039
	2	Savings and temporary cash investments			40,970	2	41,145
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, directors, ti					
		employees, and highest compensated employees Comp					
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined					
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	and contribu	tıng			
		employers and sponsoring organizations of section 501(c					
ध		employees' beneficiary organizations (see instructions)				6	
Assets	7	Notes and loans receivable, net				7	
Ä	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or	1				
		other basis Complete Part VI of Schedule D	10a	39,222			
	b	Less accumulated depreciation	10b	36,802	4,032	10c	2,420
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11		12			
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11			200	15	200
_	16	Total assets. Add lines 1 through 15 (must equal line 34	)		299,591	16	278,804
	17	Accounts payable and accrued expenses				17	
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of		)	····	21	
ies	22	Payables to current and former officers, directors, trustee	•				
Liabilities		employees, highest compensated employees, and disqui	alified perso	ons			
Liat	l	Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrelated third	-			23	
	24	Unsecured notes and loans payable to unrelated third pa				24	<del></del>
	25	Other liabilities (including federal income tax, payables to					
		parties, and other liabilities not included on lines 17-24)	Complete P	art X	22 202		22 544
	-	of Schedule D			23,393 23,393		22,544 22,544
_	26	Total liabilities. Add lines 17 through 25	7	-1-4-	23,393	26	22,544
Š		Organizations that follow SFAS 117, check here ►X	and com	piete			
nce	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets			99,650	27	46,795
ala	28				176,548		209,465
d B	29	Temporarily restricted net assets Permanently restricted net assets			170,340	28 29	203,305
Ë	23	Organizations that do not follow SFAS 117, check he	ara 🏲	ind		29	
o.		complete lines 30 through 34.					
Şţ	30	Capital stock or trust principal, or current funds			30		
SS	31	Paid-in or capital surplus, or land, building, or equipment		31			
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or		32			
Ž	33	Total net assets or fund balances	Striet Idilde	•	276,198		256,260
	34	Total liabilities and net assets/fund balances			299,591		278,804
	<u> </u>	The state of the s				<del></del>	

om	990 (2011) Millwrights Local Union No. 1121 04-2315531			Pag	e 12
Pa	rt XI · Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
		1 1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		36,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		56,4	
3	Revenue less expenses Subtract line 2 from line 1	3		19,9	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	76,:	<u> 198</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6	25	56,2	260
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		.		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		, ,		
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
b	Were the organization's financial statements audited by an independent accountant?		2b		<u> </u>
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		·
	If the organization changed either its oversight process or selection process during the tax year, explain in		•		
	Schedule O			é	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		1 1		
	issued on a separate basis, consolidated basis, or both			٠	
	X Separate basis Consolidated basis Both consolidated and separate basis			_	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			For	m <b>99</b> 0	(2011)

### SCHEDULE C (Form 990 of 990-EZ)

### **Political Campaign and Lobbying Activities**

OMB No 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ See separate instructions. If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations. Complete Part III

Na	ne of organization  Millwrights Local Uni	ion No. 1121		Employer identificati	
Pa	rt I-A Complete if the organization is exem		or is a section		
1	Provide a description of the organization's direct and indire				
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pa	rt I-B Complete if the organization is exem	npt under section 501(c	:)(3).		
1	Enter the amount of any excise tax incurred by the organization	ation under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization		5	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Fo	rm 4720 for this year?			Yes No
	Was a correction made?				Yes No
T-11	If "Yes," describe in Part IV				
Pe	rt I-C Complete if the organization is exen		<del></del>	n 501(c)(3).	
1		on for section 527 exempt func	tion		
	activities			▶ \$	
2		ted to other organizations for s	ection		
_	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 Ent	er here and on Form 1120-POI	-1		
	line 17b	•		▶ \$	□v <b>5</b> 7 N.
4	Did the filing organization file Form 1120-POL for this year		-141	to which the films	Yes X No
5	Enter the names, addresses and employer identification nu			_	
	organization made payments. For each organization listed,	•	• •		
	the amount of political contributions received that were pro-	•		•	
	as a separate segregated fund or a political action committee				(a) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization. If
					none, enter -0-
(1)	Millwrights Local 1121 Pol Act Fd	Allston	<del> </del>	<del> </del>	
(.,	90 Braintree St	MA 02134	04-2315531		13,079
(2)					
			<del>                                     </del>		
(3)					
(4)					
(5)					
(6)				<del></del>	
		1	1		L

Sched		rights Loca	ıl Union No.	1121	04	l-2315531	Page <b>2</b>
	rt II-A Complete if the organi section 501(h)).						
A	Check ▶ ☐ if the filing organizati	on belongs to an	affiliated group (a	nd list in Pa	nt IV ea	ch affiliated gro	up member's
	name, address, EIN,						
B (	Check ▶ ☐ if the filing organizati						
	Limits on Lo	bying Expendit	tures	·		(a) Filing	(b) Affiliated
	(The term "expenditures"				orga	nization's totals	group totals
	Total lobbying expenditures to influence p				<u> </u>		
b	Total lobbying expenditures to influence a	legislative body (dired	ct lobbying)		<u> </u>		
С	Total lobbying expenditures (add lines 1a	and 1b)			<u> </u>		
	Other exempt purpose expenditures						<del> </del>
	Total exempt purpose expenditures (add li	•					
f	f Lobbying nontaxable amount Enter the amount from the following table in both  columns						
Ļ	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxab	le amount is:				
Ļ	Not over \$500,000	20% of the amount on lit	ne 1e				
Ļ	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of th	ne excess over \$500,000				
L	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of th	ne excess over \$1,000,000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,000				
$\perp$	Over \$17,000,000	\$1,000,000			<u> </u>		
g	Grassroots nontaxable amount (enter 25%	of line 1f)					
h	Subtract line 1g from line 1a If zero or les	s, enter -0-					
	Subtract line 1f from line 1c If zero or less	•					
j	If there is an amount other than zero on ei	ther line 1h or line 1i,	did the organization fil	e Form 4720			
	reporting section 4911 tax for this year?						Yes No
		at made a section low. See the ins	tructions for line	do not ha s 2a throu	ve to co gh 2f or	page 4.)	he five
	Lob	bying Expenditu	res During 4-Yea	r Averagin	<u>ig Perio</u>	d	
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 20°	10	( <b>d)</b> 2011	(e) Total
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column(e))						
С	Total lobbying expenditures						
			I				

Schedule C (Form 990 or 990-EZ) 2011

d Grassroots nontaxable amount
e Grassroots ceiling amount
(150% of line 2d, column (e))
f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2011 Millwrights Local Union No. 1121	04-2315				Page
Part II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT filed	Form (	5768		
For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(b	)	
of the lobbying activity.	Yes	No	Amo	unt	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers?					
<ul> <li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li> <li>c Media advertisements?</li> </ul>					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5),	or sec	tion		
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		X
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."				e 3, i	s
Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
political expenses for which the section 527(f) tax was paid).					
a Current year		2a			
b Carryover from last year		2b			
c Total		2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			<del></del>
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			
Part IV Supplemental Information	A ps				
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-	A, and Part II-E	s, line			
1 Also, complete this part for any additional information					

Schedule C, Part I-A, Line 1

The Local maintains a separate segragated political action committee

04-2315531

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Schedule C (Form 990 or 990-EZ) 2011 Millwrights Local Union No. 1121

Part IV Supplemental Information (continued)

Schedule C (Form 990 or 990-EZ) 2011

### 2012101

# SCHEDULE D (Form 990) ·

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990,
 Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 Attach to Form 990.
 See separate instructions.

OMB No 1545-0047

2011
Open to Public Inspection

Name of the organization

Employer Identification number

			, ,
	illwrights Local Union No. 1121		04-2315531
Pa	rt I Organizations Maintaining Donor Advised Fu organization answered "Yes" to Form 990, Part I	ı <mark>nds or Other Similar Funds or</mark> V, line 6.	Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that	it the assets held in donor advised	•
	funds are the organization's property, subject to the organization's excl		☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors in	•	
	only for charitable purposes and not for the benefit of the donor or done		
	conferring impermissible private benefit?	, , , ,	Yes No
Pa	rt II Conservation Easements. Complete if the orga	anization answered "Yes" to Forn	n 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check		
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically in	mportant land area
	Protection of natural habitat	Preservation of a certified histo	
	Preservation of open space	<u> </u>	
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form of a cons	ervation
	easement on the last day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure incl	luded in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/	/06, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, ex	dinguished, or terminated by the organiza	ation during the
	tax year ▶	, ,	· ·
4	Number of states where property subject to conservation easement is	located ►	
5	Does the organization have a written policy regarding the periodic mon		
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	cing conservation easements during the	year
	<b>•</b>		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year	
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)	
	(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation easem		
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that of	describes the
	organization's accounting for conservation easements		
1.5	Organizations Maintaining Collections of Art Complete if the organization answered "Yes" to		r Similar Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), r	<del></del>	balance sheet
	works of art, historical treasures, or other similar assets held for public		
	public service, provide, in Part XIV, the text of the footnote to its finance		
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to		
	works of art, historical treasures, or other similar assets held for public		
	public service, provide the following amounts relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$
2	If the organization received or held works of art, historical treasures, or	r other similar assets for financial dain, or	• •
	following amounts required to be reported under SFAS 116 (ASC 958)	• • • • • • • • • • • • • • • • • • • •	
а	Revenues included in Form 990, Part VIII, line 1	<b>3</b>	<b>▶</b> \$
	Assets included in Form 990, Part X		<b>▶</b> \$
	Paperwork Reduction Act Notice, see the Instructions for Form 99	0.	Schedule D (Form 990) 2011

' '	NI .						
		s Local Union			2315531	Page <b>2</b>	
Pa	ert III Organizations Maintaining	Collections of Art, F	listorical Trea	sures, or Oth	er Similar Asse	ets (continued)	
3	Using the organization's acquisition, accession collection items (check all that apply)	, and other records, check	any of the followin	g that are a signif	cant use of its		
а	Public exhibition	d Loan or	exchange program	ns			
b	Scholarly research	e Other	onunango program				
С	Preservation for future generations	- <u> </u>					
4	Provide a description of the organization's colle	ections and explain how the	ev further the organ	nization's exempt	numose in Part		
	XIV	one and onplain now the	y latalor allo orga	medicin o oxompt	purpose in t are		
5	During the year, did the organization solicit or r	eceive donations of art. his	torical treasures	or other similar			
•	assets to be sold to raise funds rather than to be					Yes No	
Pa	art IV Escrow and Custodial Arra				"Yes" to Form		
	line 9, or reported an amount		•	20011 011011010100	. 100 101 01111	000,1 011114,	
1a	Is the organization an agent, trustee, custodian			er assets not			
	included on Form 990, Part X?	or other intermediary for c		0000000000		Yes No	
b	If "Yes," explain the arrangement in Part XIV as	nd complete the following t	able				
	<u> </u>	complete the following t				Amount	
С	Beginning balance				1c		
	Additions during the year				1d		
	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on For	m 990 Part X line 212			<u></u>	Yes No	
	b If "Yes," explain the arrangement in Part XIV						
	Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.						
		***	b) Prior year	(c) Two years back	(d) Three years bad		
1a	Beginning of year balance						
	Contributions						
С	Net investment earnings, gains, and						
	losses		İ				
d	Grants or scholarships						
е	Other expenditures for facilities and			•			
	programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the current	nt year end balance (line 1	, column (a)) held	as			
а	Board designated or quasi-endowment ▶	%					
b	Permanent endowment ▶ %						
С	Temporarily restricted endowment ▶	%					
	The percentages in lines 2a, 2b, and 2c should	d equal 100%					
3a	Are there endowment funds not in the possess	sion of the organization that	are held and adm	inistered for the			
	organization by					Yes No	
	(i) unrelated organizations					3a(i)	
	(ii) related organizations					3a(ii)	
b	If "Yes" to 3a(II), are the related organizations I	isted as required on Sched	ule R?			3b	
	Describe in Part XIV the intended uses of the o						
Pa	ert VI Land, Buildings, and Equip	ment. See Form 990	, Part X, line 1	0.			
	Description of property	(a) Cost or other basis	(b) Cost or other	basis (c	) Accumulated	(d) Book value	
		(investment)	(other)	<u> </u>	depreciation		
1a	Land	1					

39,222

Schedule D (Form 990) 2011

36,802

**b** Buildings

d Equipment

e Other

c Leasehold improvements

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Schedule D (Form 990) 2011 Millwrights Loca		04-2315531	Page 3
Part VII Investments—Other Securities. See I	i i		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-yea	
1) Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A)			
(B)			
		<del></del>	
(C)			
(D)			
(E)	····	<del></del>	
(F)			
(G)			<del></del>
(H)			
(1)		······································	<del></del>
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12)	<b>D</b>		
Part VIII Investments—Program Related. See	Form 990, Part X, line 13		· <del></del>
(a) Description of investment type	(b) Book value	(c) Method of Cost or end-of-yea	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
10)			
Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	<b>&gt;</b>		
Part IX Other Assets. See Form 990, Part X, II			
	escription		(b) Book value
(1)	•		· · · · · · · · · · · · · · · · · · ·
(2)			
(3)			
(4)			<u> </u>
(5)			
	<u> </u>		<u> </u>
(6) (7)			
(1)			
(8)			
(9)			
10)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		<u> </u>	<u> </u>
Part X Other Liabilities. See Form 990, Part 2	· · · · · · · · · · · · · · · · · · ·		
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2) Due to Affiliate	22,544		
(3)			
(4)			
(5)			
(4) (5) (6) (7)			
(7)			
(8)			
(9)	<u>'</u>		
(10)			
(11)	<del></del>		

22,544

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

<sup>2.</sup> FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

	dule D (Form 990) 2011 Millwrights Local Union No. 11		04-231553		Page <b>4</b>	
Pa	Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements					
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1_		
2	Total expenses (Form 990, Part IX, column (A), line 25)		Ĺ	2		
3	Excess or (deficit) for the year Subtract line 2 from line 1			3		
4	Net unrealized gains (losses) on investments			4		
5	Donated services and use of facilities			5		
6	Investment expenses			6		
7	Prior period adjustments			7		
8	Other (Describe in Part XIV)			8		
9	Total adjustments (net) Add lines 4 through 8			9		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10		
Pa	rt XII Reconciliation of Revenue per Audited Financial Statemen	nts With R	Revenue per Ret	urn		
1	Total revenue, gains, and other support per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b				
C	Recoveries of prior year grants	2c			•	
d	Other (Describe in Part XIV)	2d				
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1		[	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	j			
b	Other (Describe in Part XIV)	4b				
С	Add lines 4a and 4b			4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		<b>[</b>	5		
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return						
1	Total expenses and losses per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				<del> </del>	
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIV)	2d				
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
	Other (Describe in Part XIV)	4b				
	Add lines 4a and 4b			4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Part XIV Supplemental Information

Schedule D (Form 990) 2011 Millwrights Local Union No. 1121

Part XIV Supplemental Information (continued)

04-2315531

Page **5** 

**SCHEDULE 1** (Form 990)

2012101

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Employer Identification number

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•	ă.

OMB No 1545-0047

ŝ × (h) Purpose of grant or assistance Yes to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" non-cash assistance (g) Description of 04 - 2315531(f) Method of valuation (book, FMV, appraisal, other) Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (e) Amount of noncash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable 1121 Millwrights Local Union No. General Information on Grants and Assistance (b) EIN the selection criteria used to award the grants or assistance? (a) Name and address of organization or government Part III Part Ξ ල 9 3 8 6 3 ₹

Enter total number of other organizations listed in the line 1 table

2012101

A) I almbados	Schedule (/Form 990) (2011) Millwrights Local Union No. 1121	Local Union No.		04-2315531		Page 2
Part III	Grants and Other Assistance to Individuals in the L Part III can be duplicated if additional space is needed.	o Individuals in the Un	ited States. Compl	ete if the organizatio	Jnited States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22	990, Part IV, line 22
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other)
1 Scho	Scholarships	20	28,938			
2						
en en						
4						
· vo						
9						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	nplete this part to provid	e the information re	quired in Part I, line	2, and any other additional	information.

2012101

# SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011 Open to Public Inspection

OMB No 1545-0047

Name of the organization

Millwrights Local Union No. 1121

Employer Identification number 04-2315531

Form 990, Part VI, Line 5 - Material Diversion of Assets

An investigation by the EBSA Division of the US Department of Labor is underway for a diversion of assets in prior years discovered in the current fiscal year.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders Organized with dues paying members.

Form 990, Part VI, Line 7a - Election of Members and Their Rights Members elect the officers and executive boad members.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members

Some of the decisions of the executive board are subject to the approval of the members.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Review by officers.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Upon Request.

ē	
5	
N	

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ Attach to Form 990.

▶ See separate instructions.

2011

OMB No 1545-0047

Open to Public Inspection

Employer Identification number

	Millwrights Local Union No. 1121					04-2315531	31	
Part !	Identification of Disregarded Entities (Complete If the	organization answered "Yes" to Form 990, Part IV, line 33.)	wered "Yes" to F	orm 990, Part IV	', line 33.)			
	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Total moome	(e) End-of-year assets	(f) Direct controlling entity	<u>p</u>
3								
(2)								
(3)								
(4)								
(9)								
Part II	Identification of Related Tax-Exempt Organizations (( one or more related tax-exempt organizations during the )	Complete if the o tax year.)	rganization ansv	vered "Yes" to Fo	orm 990, Part IV,	Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had tax year.)	ıt had	
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity	Section 512(b)(13) controlled entity? Yes No	(13) IIV? <b>No</b>
(1) Eastern 90 Brain Allston	Eastern Millwrights Regional Counci 90 Braintree St Allston	Labor Unio	U.O.	501c5		N/A		×
(2) Nort	Northeast Regional Millwright					N/A		×
(3) Apprent 90 Brain Allston	Apprenticeship Fund 90 Braintree St Allston	Trust	MA	501c3		N/A		×
(4)								
(5)								
For Paperwo	For Paperwork Reduction Act Notice, see the Instructions for Form 990.					Schedule	Schedule R (Form 990) 2011	) 2011

For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

Page 2

Schedule R (Form 990) 2011 Percentage ownership Percentage ownership (I) General or managing partner? Yes No Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Schedule R (Form 990) 2011 Millwrights Local Union No. 1121 04–2315531

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34

Part III because it had one or more related organizations treated as a partnership during the tax year.) amount in box 20 of end-of-year assets Schedule K-1 (Form 1065) Code V—UBI Share of 9 (h)
Disproportionate
alloc ? Yes No Share of total income ε Share of end-ofyear assets 6 (C corp, S corp, Type of entity or trust) (f) Share of total Income Direct controlling (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections
512-514) entity Ð foreign country) Legal domicite (state or (c) Legal domicile (state or foreign Primary activity Primary activity ē Name, address, and EIN of related organization Name, address, and EIN related organization Part IV ρĄ Ξ £ 4 3 € 3 ଚ <u>ල</u>

2012101

Schedule R (Form 990) 2011

Millwrights Local Union No. 1121

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Part V

04-2315531

Page 💰

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Yes

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<del>1</del>

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

- During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts iI-IV? a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
  - Gift, grant, or capital contribution to related organization(s)
    - c Gift, grant, or capital contribution from related organization(s)
      - d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- h Exchange of assets with related organization(s)
- i Lease of facilities, equipment, or other assets to related organization(s)
- j Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
- Performance of services or membership or fundraising solicitations by related organization(s)
- Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
  - Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- q Other transfer of cash or property to related organization(s)

r Other transfer of cash or property from related organization(s)

thresholds	(p)	Mothod of determination
ationships and transaction	(0)	powler terrory
e, including covered rela	(q)	Transport
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this lir	(e)	Missing of single and single

	Name of other organization	Transaction type (a–r)	Amount involved	Method of determining amount involved
(1)	Northeast Regional Millwright	0	1,795	1,795 cash paid
(2)	Apprenticeship Fund	·O	12,700	12,700 cash paid
(3)				
(4)				
(5)				
(9)				

Schedule R (Form 990) 2011

Page 🕊

04-2315531

Part VI

2012101

Schedule R (Form 990) 2011 Millwrights Local Union No. 1121

Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(k) Percentage ownership													90) 2011
	٤												orm 99
(l) General or managing partner?	Yes												e R (F
(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)													Schedule R (Form 990) 2011
tonate ons?	٩									-			
(h) Disproportionate allocations?	Yes												
(g) Share of end-of-year assets													
(f) Share of total income													
artners ion )(3)	Š											_	
(e) Are all partners section 501(c)(3) organizations?	Yes												
(d) Predominant income (related, unrelated, excluded from tax under													
(c) Legal domicile (state or foreign	country)												
(b) Primary activity													
(a) Name, address, and EIN of entity		(1)	(2)	(3)	(4)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	

Schedule R (Form 990) 2011 Millwrights Local Union No. 1121

Part VII Supplemental Information 04-2315531

Page 5

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

**⊕.** ••' 3

Form 4562
Department of the Treasury

(99)

**Depreciation and Amortization** 

(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

**2011** 

Attachment Sequence No 179

Internal Revenue Service
Name(s) shown on return

Millwrights Local Union No. 1121

Identifying number 04-2315531

				<u> </u>					<del></del>
	ess or activity to which this form relates								
	ndirect Depreciati	<del></del>	arty Lindar Sa	ection 179					
1 0	Note: If you have a	•	•		omole	ete Part I	1		
1	Maximum amount (see instructions		r, complete r ar	t v belole you o	OHIDA	oto i ait i	<u> </u>	1	500,000
2	Total cost of section 179 property	•	e instructions)					2	
3	Threshold cost of section 179 prop	•	•	nstructions)				3	2,000,000
4	Reduction in limitation. Subtract lin	•	•	<b>-</b>			ľ	4	
5	Dollar limitation for tax year. Subtract line	e 4 from line 1 If zero or	less, enter -0 If man	ried filing separately, see	e instruc	ctions		5	
6	(a) Description			(b) Cost (business use on			lected cost		
			·						
7	Listed property Enter the amount to	from line 29			_ 7				
8	Total elected cost of section 179 p	roperty Add amounts	s ın column (c), lıne	es 6 and 7				8	
9	Tentative deduction Enter the sm		=					9	
10	Carryover of disallowed deduction								
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see						)	11_	
12	Section 179 expense deduction. A						, ,	12	
13	Carryover of disallowed deduction			2	13				
	: Do not use Part II or Part III below	<del></del>	· · · · · · · · · · · · · · · · · · ·						· · · · · · · · · · · · · · · · · · ·
	art II Special Depreciati	• •				lude liste	a prope	rty)	(See instructions)
14	Special depreciation allowance for		ther than listed pro	perty) placed in serv	ice				
4-	during the tax year (see instruction	•					•	14	
15 10	Property subject to section 168(f)(	•						15	· · · · · · · · · · · · · · · · · · ·
16	Other depreciation (including ACR  Int III MACRS Depreciat		ide listed prop	ortu I /Coo motru	otions	. \		16	
	art III MACRS Depreciat	ion (Do not incit		ion A	CHOIS	5.)			
17	MACRS deductions for assets place	red in service in tax v						17	1 613
17 18	MACRS deductions for assets place	•	ears beginning be	fore 2011	here •			17	1,613
17 18	If you are electing to group any assets placed	in service during the tax ye	vears beginning be	fore 2011 eral asset accounts, check		eral Depre	ciation S		
	If you are electing to group any assets placed	•	vears beginning be	fore 2011 eral asset accounts, check Tax Year Using the		eral Depre	Ciation S		
	If you are electing to group any assets placed	t in service during the tax your ssets Placed in Sel	rears beginning be ear into one or more gen rvice During 2011 (c) Basis for depre (business/investmen	fore 2011 eral asset accounts, check Tax Year Using the criation tuse (d) Recovery	e Gen	eral Depre	eciation S	ystem	
	Section B—A	assets Placed in Se (b) Month and year	rears beginning be ear into one or more gen rvice During 2011 (c) Basis for depre	fore 2011 eral asset accounts, check Tax Year Using the criation tuse (d) Recovery	e Gen			ystem	
18	Section B—A  (a) Classification of property  3-year property	t in service during the tax your ssets Placed in Sel	rears beginning be ear into one or more gen rvice During 2011 (c) Basis for depre (business/investmen	fore 2011 eral asset accounts, check Tax Year Using the criation tuse (d) Recovery	e Gen			ystem	
18 19a	Section B—A	t in service during the tax your ssets Placed in Sel	rears beginning be ear into one or more gen rvice During 2011 (c) Basis for depre (business/investmen	fore 2011 eral asset accounts, check Tax Year Using the criation tuse (d) Recovery	e Gen			ystem	
18 19a b	Section B—A  (a) Classification of property  3-year property  5-year property  7-year property	t in service during the tax your ssets Placed in Sel	rears beginning be ear into one or more gen rvice During 2011 (c) Basis for depre (business/investmen	fore 2011 eral asset accounts, check Tax Year Using the criation tuse (d) Recovery	e Gen			ystem	
19a b c	Section B—A  (a) Classification of property  3-year property  5-year property  7-year property	t in service during the tax your ssets Placed in Sel	rears beginning be ear into one or more gen rvice During 2011 (c) Basis for depre (business/investmen	fore 2011 eral asset accounts, check Tax Year Using the criation tuse (d) Recovery	e Gen			ystem	
19a b c	Section B—A  (a) Classification of property  3-year property  5-year property  7-year property  10-year property	t in service during the tax your ssets Placed in Sel	rears beginning be ear into one or more gen rvice During 2011 (c) Basis for depre (business/investmen	fore 2011 eral asset accounts, check Tax Year Using the criation tuse (d) Recovery	e Gen			ystem	
19a b c d	Section B—A  (a) Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property	t in service during the tax your ssets Placed in Sel	rears beginning be ear into one or more gen rvice During 2011 (c) Basis for depre (business/investmen	fore 2011 eral asset accounts, check Tax Year Using the criation tuse (d) Recovery	e Gen			ystem	
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